

FILED

2008 FEB 25 PM 3:04

CLERK OF COURT  
SOUTHERN DISTRICT OF CALIFORNIA

BY Rm DEPUTY

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF CALIFORNIA

*Manuel Cabrera Alejandro*

v.

*Fred Lawrence: Warden  
Lindstedt: Lieutenant  
Marshal Department  
Medical Department*

Civil No. *3:08-cv-00092-JLS-RBB*

REQUEST FOR APPOINTMENT OF  
COUNSEL UNDER THE CIVIL RIGHTS  
ACT OF 1964, 42 U.S.C. 2000e 5(f)(1);  
DECLARATION IN SUPPORT OF  
REQUEST

1. I, the plaintiff in the above-entitled employment discrimination action, request that the court appoint an attorney to represent me in this matter. In support of this request, I state as follows:

- A. my claim is meritorious (that is, I have a good case), and
- B. I have made a reasonably diligent effort to obtain counsel, and
- C. I am unable to find an attorney willing to represent me on terms that I can afford.

2. A copy of the Notice-of-Right-to-Sue-Letter I received from the Equal Opportunity Commission is attached to the complaint which accompanies this request for counsel.

3. A. Does the Notice-of-Right-to-Sue-Letter show that the Commission found "no reasonable cause" to believe the allegations made in your charge were true?

\_\_\_\_ Yes

AD No

1 IF YOUR ANSWER IS "YES," YOU MUST ATTACH A COPY OF THE  
2 COMMISSION'S INVESTIGATIVE FILE TO THIS REQUEST AND ANSWER QUESTIONS B  
3 AND C.

4 B. Do you question the correctness of the Commission's "no reasonable cause"  
5 determination?

6 ☐ Yes

☒ No

7 C. If you answered "yes" to question 3B, what are your reasons for questioning the  
8 Commission's determination? Be specific and support your objections with fact. Do not simply  
9 repeat the allegations made in your complaint; the court will review your complaint in considering this  
10 request for counsel.

11  
12 *I do have a good case, I do have back injury*  
13 *I do have four more medical problems*  
14 *I do have serious medical needs.*  
15 *I do have right to medical treatment.*

16 *Counsel should be appointed because of the following*  
17 *reasons:*

18 *Petitioner is unable to afford counsel and the issues*  
19 *in this case are particularly complex.*

20 *Petitioner has meritorious issues, to ensure due process*  
21 *under these circumstances of this case, counsel is needed*  
22 *because, Petitioner is untrained in the law and is*  
23 *completely unable to navigate the very complex laws*  
24 *at issue.*

25 *Due to his uncertainty, and lack of knowledge of the law*  
26 *Petitioner respectfully requests the Court to appoint*  
27 *him counsel in the interest of justice.*

28 *Due to the above reasons and points, Petitioner*  
*respectfully requests that his Motion for Appointment*  
*of Counsel be granted.*

(Attach additional sheets as needed)

4. Have you talked with any attorney about handling your claim?

Yes Yes        No

If "YES," give the following information about each attorney with whom you talked:

Attorney: John B. Little: Callahan, Little & Sullivan

When: December 23, 2007

Where: I wrote a letter 12702 High Blue Dr. Ste. 100

How (by telephone, in person, etc.): San Diego Ca. 92130. 619, 234-0444

Why attorney was not employed to handle your claim: He did not ever respond to my letter.

Attorney: Dennis A. Dascaro: 3500 Fifth Ave. Ste. 305  
San Diego Ca. 92103

When: February 13, 2008

Where: I do try several times calling. no avail --

How (by telephone, in person, etc.): By calling 619, 338-8399  
~~619, 631-4793~~

Why attorney was not employed to handle your claim:

Always the answer machine.

Attorney: Bruce Menzies: 1333 E. Madison Ave. #104  
El Cajon Ca. 92020

When: February 13, 2008

Where: I did it try to call him. Several times no avail --

How (by telephone, in person, etc.): By calling 619, 631-4793

Why attorney was not employed to handle your claim:

Always the answer machine. Also: I spoke to Attorney Jeremy Warren to help me out, to contact an attorney for my legal action case. No avail --

(Attach additional sheets as needed) 619, 234-4433

5. Explain any other efforts you have made to contact an attorney to handle your claim:

Also I raise this concern with Attorney  
Mr. Guzman: Federal Defenders.  
to help me out to get an Attorney for this Civil  
Action. with no avail.

6. Give any other information which supports your application for the court to appoint an  
attorney for you: The ICE in all likelihood will attempt to remove  
Petitioner from the U.S. to country of origin, were  
Petitioner does not have any family support or resources  
in country of origin and it would be an impossible  
task to obtain adequate counsel in country of origin  
with the relevant knowledge of American law.

7. Give the name and address of each attorney who has represented you in the last 10 years  
for any purpose: Attorney at Law.

Mayfield Daniel M.  
(AV) Carpenter & Mayfield  
730 N. 1st Street  
San Jose Ca. 95112  
(408) 287-1916

(Attach additional sheets as needed)

8. I cannot afford to obtain a private attorney. The details of my financial situation are listed  
below:

A. Employment

Are you employed now? \_\_\_ yes NO no \_\_\_ am self-employed

Name and address of employer:

N/A

1 If employed, how much do you earn per month? N/A

2 If not employed, give month and year of last employment: 1989

3 How much did you earn per month in your last employment? \$1600.00

4 If married, is your spouse employed? no

5 If "YES," how much does your spouse earn per month? N/A

6 If you are a minor under age 21, what is your parents' or guardians' approximate monthly

7 income? N/A - Parents are deceased.

8

9 B. Assets

10 (i) Other Income

11 Have you received within the past 12 months any income from a business, profession or other  
12 form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity  
13 payments or other sources? no

14 If "YES," give the amount received and identify the sources:

15 \$ Received Source

16 Only \$150.00 loan from my brother

17 José Cabrera Alejandro

18 390 Madrone Dr.

19 Hollister Ca. 95023

20 831, 630-0214

21

22

23

24

25

26

27

28 (Attach additional sheets as necessary)

(ii) CashHave you any cash on hand or money in savings or checking accounts? \_\_\_ yes no

If "YES," state total amount: \_\_\_\_\_

(iii) PropertyDo you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? \_\_\_ yes no

If "YES," give value and describe it:

ValueDescriptionN/AC. Obligations and Debts(i) DependentsYour marital state is: \_\_\_ single X married \_\_\_ widowed separated or divorced.

Your total number of dependents is : \_\_\_\_\_

List those person you actually support, your relationship to them, and your monthly contribution to their support:

Name/RelationshipMonthly Support PaymentN/A

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(ii) Debts and Monthly Bills

List all creditors, including banks, loan companies and charge accounts, etc.

<u>Creditor</u>	<u>Total Debt</u>	<u>Monthly Payment</u>
Rent: <u>N/A</u>		
Mortgage		
on Home: <u>N/A</u>		
Others:		

9. Signature

I declare under penalty of perjury that the above is true and correct.

Dated: 2-11, 2008

Maurice Calhoun  
Signature

(Notarization is not required)

December 23, 2007

John B. Little  
Attorney at Law

Dear Mr. Little: I am writing  
you this letter, for two reasons.  
First, I wish you a Merry Christmas.

"On the other hand,"  
I will like to know that, "If you do  
prisoners cases?"

"This is my situation:"

I am in custody with the Marshalls.  
I hurt my back, when I was  
working with the Government.

Since the accident, I been requesting  
medical treatment, by using Sick call  
request forms and Grievance forms.  
All my requests have been denied.

The only thing the Marshalls did it  
for me, is that, - what is call an  
MRI, which been done in Albarado  
Hospital. And two of the Doctors  
overther told me that, - I do need  
surgery and therapy. Because,  
my Back and my legs are in pain  
24 hours a day.

I am including an MRI copy  
that way you can see for yourself  
we have a good case.



Pretrial Inmate Health care  
Concerns.

Serious Medical Need.

Section 1983 of Title 42  
of the United State Code.

844-6(A) and 844.4. and 844.2.  
and 845.4

The Eighth Amendment,  
protects your right to medical  
care, The Constitution  
guarantees prisoners this right.  
The prison must provide you  
with medical care if you need it.

Please Mr. John:

I need you to raise this  
concerns to the court room.

I pray that God bless you

Sincerely  
Manuel A. Cabrera  
Reg. No. 09376-097